

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	T.D.		11/5/99
O.I.P.E. CLASSIFIER		48	11/12/99
FORMALITY REVIEW	MC	71470	11/23/99

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Date
1	10/17/02
2	✓
3	✓
4	✓
5	✓
6	✓
7	✓
8	✓
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10	✓
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BEST AVAILABLE COPY

If more than 150 claims or 10 actions  
staple additional sheet her

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